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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND	_	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Catherine First name S Middle name Smith Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5650	

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Debtor 1 Catherine S Smith

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	EINS	EINs			
5. Where you live	339 Overlea Place Abingdon, MD 21009	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			
this district to file for	above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.	in here. Note that the court will send any notices to the mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition have lived in this district longer than in any other district. I have another reason.			

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Der	Catherine 5 Smith					Case	iumber (if known)			
Par	Tell the Court About	our Bank	ruptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ Chap	ter 7							
		☐ Chap	ter 11							
		☐ Chap	ter 12							
		☐ Chap	ter 13							
8.	How you will pay the fee	abo ord a p	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
				the fee in installments. If y <i>e in Installments</i> (Official For		e this option, sign	and attach the Applica	ation for individuals to Pay		
		but app	is not required is	t my fee be waived (You ma uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Filin	may do so able to pay	only if your inco the fee in install	me is less than 150% of ments). If you choose to	of the official poverty line that this option, you must fill out		
9.	Have you filed for	□ No.								
	bankruptcy within the last 8 years?	Yes.								
	iast o years:	Tes.	District	District of Maryland	When	6/14/16	Case number	16-18027		
			District	District of Maryland	When	0/14/10	Case number	10-10027		
			District		When		Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with	■ No □ Yes.								
	you, or by a business partner, or by an affiliate?									
			Debtor				Relationship to y	/ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y			
			District		When		Case number, if	known		
11.	Do you rent your	■ No.	Go to li	ine 12.						
	residence?	☐ Yes.	Has yo	ur landlord obtained an evict	ion judgm	ent against you?				
				No. Go to line 12.						
				Yes. Fill out <i>Initial Statemer</i> this bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it as part of		

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Deb	otor 1 Catherine S Smith	า		Case number (if known)		
Dan	A 2. Domont About Anu Di		Var. Our as a Cala D			
Par	Report About Any Bu	isinesses	You Own as a Sole P	oprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	Go to Part 4.		
		☐ Yes.	Name and location	of business		
	A sole proprietorship is a	— 100.				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business,			
	If you have more than one sole proprietorship, use a		Number, Street, Ci	y, State & ZIP Code		
	separate sheet and attach it to this petition.		Check the appropri	ate box to describe your business:		
				Business (as defined in 11 U.S.C. § 101(27A))		
			_	et Real Estate (as defined in 11 U.S.C. § 101(51B))		
				r (as defined in 11 U.S.C. § 101(53A))		
			_	Broker (as defined in 11 U.S.C. § 101(6))		
			☐ None of the	- ' '		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, in 11 U.S.C. 1116(1)(B).				bu are a small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	I am not filing unde	r Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Ch Code.	napter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Ch	napter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property	or Any Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
	public health or safety? Or do you own any property that needs		If immediate attention			
	immediate attention?		needed, why is it need	ded?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property			
				Number, Street, City, State & Zip Code		

Debtor 1 Catherine S Smith

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Catherine S Smith				Case number (if known)				
Part	6: Answer These Quest	ions for Rep	orting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
		[☐ No. Go to line 16b.					
		I	Yes. Go to line 17.					
				usiness debts? Business debts are debts assument or through the operation of the busi				
			☐ No. Go to line 16c.					
		[☐ Yes. Go to line 17.					
		16c. S	State the type of debts you o	we that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and			Oo you estimate that after any exempt proprailable to distribute to unsecured creditors?	erty is excluded and administrative expenses			
	administrative expenses	ı	No					
	are paid that funds will be available for distribution to unsecured creditors?	[☐ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		□ 5001-10,000	☐ 50,001-100,000			
	owe?	□ 100-199	1	□ 10,001-25,000	☐ More than100,000			
		200-999						
19.	How much do you	□ \$0 - \$50	,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		- \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			1 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		₩ \$500,00	1 - \$1 million	— \$100,000,001 - \$300 million	Li More than \$50 billion			
20.	How much do you	□ \$0 - \$50	,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		1 - \$100,000	= \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			1 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500,00	1 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below							
For	you	I have exar	nined this petition, and I dec	clare under penalty of perjury that the inform	nation provided is true and correct.			
				, I am aware that I may proceed, if eligible, elief available under each chapter, and I ch				
				not pay or agree to pay someone who is no e notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this			
		I request re	lief in accordance with the c	chapter of title 11, United States Code, spec	cified in this petition.			
				, concealing property, or obtaining money o to \$250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			rine S Smith	Claratura of Dates	. 2			
		Catherine Signature of		Signature of Debtor	1.2			
		Executed of	n September 18, 2019	Executed on				
			MM / DD / YYYY		/ DD / YYYY			

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Debtor 1 Catherine S Smith Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Edward	d C. Christman, Jr.	Date	September 18, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Edward C.	. Christman, Jr. 08121		
Printed name			
Christman	n & Fascetta LLC		
Firm name			
810 Glene	agles Court		
Suite 301			
Towson, N	MD 21286		
	City, State & ZIP Code		
			christman-fascetta@bankruptcymd.c
Contact phone	410-494-8388	Email address	om
08121 MD			
Bar number & S	tate		

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Fill	in this information to identify your case:		
Del	otor 1 Catherine S Smith		
Del	First Name Middle Name Last Name		
	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: DISTRICT OF MARYLAND		
	se numberown)	_	k if this is an
		amer	idod illing
∩f	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a	is complete and accurate as possible. If two married people are filing together, both are equally responsible rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amen original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	for supplyi	
		Vour	essets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	180,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,095.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	182,095.00
Par	t 2: Summarize Your Liabilities		
		Your I	iabilities
		Amou	nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	. \$	264,304.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	20,735.00
	Your total liabilities	s \$	285,039.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,690.61
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,663.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with y	our other so	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily fo household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	r a persona	l, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules.	is box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Catherine S Smith

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,531.66

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clain	1
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	O	ase 19-2240	, ,		ge 10 01 47		
Fill in this infor	mation to identify	your case and th	is filin	g:			
Debtor 1	Catherine S	Smith					
Dalatan	First Name	Middle	Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name			
United States Ba	ankruptcy Court for	the: DISTRICT	OF MA	RYLAND			
C						_	
Case number _							Check if this is an amended filing
							, and the second
Official Fo	rm 106A/E	3					
	e A/B: Pi	_					12/15
			an asse	t only once. If an asset fits in more than one	category, list the asse	et in the	
think it fits best. E	Be as complete and a	accurate as possibl	e. If two	married people are filing together, both are his form. On the top of any additional pages	equally responsible fo	r supply	ying correct
Answer every ques		attaon a separate si	1001 10 1	ms form. On the top of any additional pages	, write your name and	ouse nu	iniber (ii kilowii).
Part 1: Describe	Each Residence, B	uilding, Land, or Ot	her Rea	Estate You Own or Have an Interest In			
1. Do you own or	have any legal or eg	uitable interest in a	ny resid	lence, building, land, or similar property?			
□ No. Go to Pa			•				
_							
Yes. Where i	is the property?						
1.1			Wha	t is the property? Check all that apply			
339 Overl	ea Place			Single-family home	Do not deduct secure	d claims	or exemptions. Put
Street address,	, if available, or other des	cription		Duplex or multi-unit building	the amount of any sec Creditors Who Have		
				Condominium or cooperative	Croundry Time Flave	Jiaiiii 0	accurred by a reperty.
				Manufactured or mobile home	0	•	
Abingdon	n MD	21009-0000		Land	Current value of the entire property?		urrent value of the ortion you own?
City	State	ZIP Code		'''	\$180,000.0	<u> </u>	\$180,000.00
				Timeshare Other	Describe the nature		
				has an interest in the property? Check one	a life estate), if know		y by the entireties, or
				Debtor 1 only	Tenants by the	Entire	ties
Harford				2 0 2 10 11 2 0 1 11 1			
County				,	Check if this is	commu	nity property
			Othe	At least one of the debtors and another r information you wish to add about this iter	(see instructions)		
				erty identification number:	.,		
2 Add the dol	lar value of the no	ortion you own fo	r all of	your entries from Part 1, including any	entries for		
				r here			\$180,000.00
Part 2: Describe	Your Vehicles						
				iny vehicles, whether they are registere Schedule G: Executory Contracts and Une		y vehic	les you own that
3. Cars, vans, tr	ucks, tractors, sp	ort utility vehicle	s, moto	prcycles			
■ No							
■ No							

Official Form 106A/B Schedule A/B: Property page 1

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

□ No

Yes. Describe.....

Clothing and shoes

\$220.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

Yes. Describe.....

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Debtor 1	Catherine S Smit	h	Case number (if known)	
	Jev	velry		\$300.00
Exam ■ No	arm animals apples: Dogs, cats, birds, . Describe	horses		
■ No	ther personal and hou		not already list, including any health aids you did not list	
			art 3, including any entries for pages you have attached	\$1,860.00
Part 4: De	escribe Your Financial A	ssets		
		or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		n your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition	חנ
Exam			ounts; certificates of deposit; shares in credit unions, brokerage h with the same institution, list each. Institution name:	ouses, and other similar
	17	.1. Checking	PNC Bank	\$80.00
	17	.2. Savings	PNC Bank	\$30.00
	17	.3. Chekcing	Sea West FCU	\$10.00
	17	.4. Savings	Sea West FCU	\$0.00
	17	.5. Checking	Amphibious Vanal Credit Union	\$12.00
	17	.6. Savings	Amphibious Naval Credit Union	\$0.00
Exam	s, mutual funds, or pu pples: Bond funds, inves	blicly traded stocks stment accounts with bro	okerage firms, money market accounts	
■ No □ Yes.		Institution or issuer i	name:	
19. Non-p		nd interests in incorpo	orated and unincorporated businesses, including an interest	in an LLC, partnership, and
■ No □ Yes	Give specific informat	ion about them		
Official For		ion about them	Schedule A/B: Property	page 3

		Case 19-22454	4 DOC I FILED	09/10/19 Page 13 01 47	
De	ebtor 1 Cathe	erine S Smith		Case number (if known)	
		Name of entity:		% of ownership:	
	Negotiable ins Non-negotiable	nd corporate bonds and other neg truments include personal checks, c e instruments are those you cannot e ecific information about them Issuer name:	cashiers' checks, promissor	ry notes, and money orders.	
21.		pension accounts erests in IRA, ERISA, Keogh, 401(k)	, 403(b), thrift savings acco	ounts, or other pension or profit-sharing plans	
	Yes. List each	h account separately. Type of account:	Institution name:		
		IRA	IRA		\$103.00
22.	Your share of a Examples: Agr			as, water), telecommunications companies, or others	
	☐ Yes				
23.	Annuities (A co	ontract for a periodic payment of mo	ney to you, either for life o	for a number of years)	
	☐ Yes	Issuer name and description.			
24.		education IRA, in an account in a 30(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program	, or under a qualified state tuition program.	
	☐ Yes	Institution name and descript	ion. Separately file the rece	ords of any interests.11 U.S.C. § 521(c):	
	■ No	ble or future interests in property ecific information about them	(other than anything liste	ed in line 1), and rights or powers exercisable for your bei	nefit
26.		rights, trademarks, trade secrets, ernet domain names, websites, proce			
	☐ Yes. Give sp	pecific information about them			
27.		chises, and other general intangil Iding permits, exclusive licenses, co		ings, liquor licenses, professional licenses	
		pecific information about them			
M	oney or property	y owed to you?		Current value o portion you ow Do not deduct so claims or exemp	n? ecured
	Tax refunds ov ■ No	•	ling whather are less than 1	ed the returns and the towns	
		ecilic information about them, includ	ing whether you already fil	ed the returns and the tax years	
29.	Family suppor Examples: Pas		ıl support, child support, ma	aintenance, divorce settlement, property settlement	

Official Form 106A/B Schedule A/B: Property page 4

 $\hfill \square$ Yes. Give specific information.....

■ No

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Del	otor 1	Catherine S Smith	Case number (if known)	
_	Examp	amounts someone owes you oles: Unpaid wages, disability insurance payments, disability bene benefits; unpaid loans you made to someone else	fits, sick pay, vacation pay, workers' compe	nsation, Social Security
_	■ No □ Yes	Give specific information		
		ts in insurance policies		
		oles: Health, disability, or life insurance; health savings account (H	SA); credit, homeowner's, or renter's insurar	nce
I	□ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
_	If you a	terest in property that is due you from someone who has diec are the beneficiary of a living trust, expect proceeds from a life ins one has died.		eive property because
I	☐ Yes.	Give specific information		
		against third parties, whether or not you have filed a lawsuit bles: Accidents, employment disputes, insurance claims, or rights		
I	☐ Yes.	Describe each claim		
_	Other o	contingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights to	set off claims
I	☐ Yes.	Describe each claim		
_	Any fin ■ No	ancial assets you did not already list		
_		Give specific information		
36.		he dollar value of all of your entries from Part 4, including an		\$235.00
Par	t 5: De	scribe Any Business-Related Property You Own or Have an Interest In	. List any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related pro	pperty?	
		to Part 6.		
L	Yes. G	Go to line 38.		
Par		scribe Any Farm- and Commercial Fishing-Related Property You Own ou own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
46.		own or have any legal or equitable interest in any farm- or co	ommercial fishing-related property?	
	_	Go to line 47.		
		_		
Par	t 7:	Describe All Property You Own or Have an Interest in That You Did	Not List Above	
		I have other property of any kind you did not already list? Oles: Season tickets, country club membership		
		Give specific information		
54.	Add t	he dollar value of all of your entries from Part 7. Write that nu	mber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1	Catherine S Smith		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$180,000.00
56. Part	2: Total vehicles, line 5	\$0.00		
57. Part	3: Total personal and household items, line 15	\$1,860.00		
58. Part	4: Total financial assets, line 36	\$235.00		
59. Part	5: Total business-related property, line 45	\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54	+ \$0.00		
62. Tota	I personal property. Add lines 56 through 61	\$2,095.00	Copy personal property total	\$2,095.00
63. Tota	of all property on Schedule A/B. Add line 55 + line 62			\$182,095.00

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1	Catherine S Smit	h		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number				
if known)				Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
339 Overlea Place Abingdon, MD 21009 Harford County	\$180,000.00	•	\$1.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(b)(5)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	F10C. 8 11-304(b)(3)
Rugs, sofa, chairs, tables, lamps, pictures, tv, small appliances,	\$990.00	•	\$990.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(b)(4)
dishes, utensils, cookware, bed, bedding, dresser, mirror, household toolss, lawn mower, grill Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	1100.3 11 00 ((3)(4)
Laptop, desk and fax Line from Schedule A/B: 7.1	\$350.00		\$350.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(b)(5)
Ellie Holli Garicadie 24 E. TT			100% of fair market value, up to any applicable statutory limit	1100.3 11 00-1(0)(0)
Clothing and shoes	\$220.00		\$220.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(b)(5)
Zino nom concedero / v D. TTTT			100% of fair market value, up to any applicable statutory limit	
Jewelry	\$300.00		\$300.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(b)(5)
Line from Sofieddie A/D. 12:1			100% of fair market value, up to any applicable statutory limit	

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Denioi	Catherine 3 Silliti				
	rief description of the property and line on chedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	hecking: PNC Bank	\$80.00		\$80.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
	The Helli devilopable 772.			100% of fair market value, up to any applicable statutory limit	
	avings: PNC Bank ne from <i>Schedule A/B</i> : 17.2	\$30.00		\$30.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
	The Hoth Generalic PAB. 17.12			100% of fair market value, up to any applicable statutory limit	1100.3 11 004(5)(0)
	hekcing: Sea West FCU	\$10.00		\$10.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
LII	THE HOLL SCHEUDIE PAB. 17.3			100% of fair market value, up to any applicable statutory limit	110c. g 11-304(b)(3)
	hecking: Amphibious Vanal Credit	\$12.00		\$12.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
_	ne from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
	RA: IRA	\$103.00		100%	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)
LII	THE HOLLI SCHEUUIE AV.B. 21.1			100% of fair market value, up to any applicable statutory limit	1100. § 11-304(11)
	re you claiming a homestead exemption Subject to adjustment on 4/01/22 and every No			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property cover	red by the exemption w	ithin 1	,215 days before you filed this case'	?
	□ No				
	☐ Yes				

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		Case	19-22434 DOC 1 11	160 03/ 10/	is rage to	01 47	
Fill in this info	ormation to identi	fy your	case:				
Debtor 1	Catherine	S Smit	h				
200101	First Name	0 0	Middle Name	Last Name			
Debtor 2							
(Spouse if, filing)	First Name		Middle Name	Last Name			
United States I	Bankruptcy Court f	or the:	DISTRICT OF MARYLAND				
Case number							
(if known)						☐ Check	if this is an
						amend	ded filing
o	4000						
Official Fo	rm 106D						
Schedule	e D: Credit	tors '	Who Have Claims S	Secured	by Propert	У	12/15
	the Additional Page		two married people are filing together, number the entries, and attach it to				
1. Do any credito	ors have claims sec	ured by y	our property?				
☐ No. Che	eck this box and su	ıbmit this	s form to the court with your other:	schedules. You	u have nothing else t	o report on this form.	
Yes. Fil	in all of the inform	nation be	elow.				
	All Secured Clair						
				P	Column A	Column B	Column C
			ore than one secured claim, list the cred particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
much as possible	e, list the claims in all	phabetica	I order according to the creditor's name) .	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Special	ized Loan Servi	į l	Describe the property that secures the	he claim:	\$247,808.00	\$180,000.00	\$67,808.00
Creditor's N	ame	- ;	339 Overlea Place Abingdon	, MD			
			21009 Harford County				
	cent Blvd Ste 3	800 L	As of the date you file, the claim is: (Check all that			
Highlan 80129	ds Ranch, CO	;	apply.	on an inac			
			Contingent				
Number, Str	eet, City, State & Zip Co		Unliquidated				
Who owes the	debt? Check one.		☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only			An agreement you made (such as n	nortaage or secu	red		
Debtor 2 only			car loan)	lortgago or occa	100		
_ ′			Statutory lien (such as tax lien, med	hanic's lien)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit				
☐ Check if this community	claim relates to a debt		Other (including a right to offset)				
	Opened						
	09/06 L Active	ast					
Date debt was i			Last 4 digits of account numb	er 9477			

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Debtor 1 Catherine S Smith		Case number (if known)		
First Name Middle N	ame Last Name			
2.2 Specialized Loan Servi	Describe the property that secures the claim:	\$16,496.00	\$180,000.00	\$16,496.00
Creditor's Name	339 Overlea Place Abingdon, MD 21009 Harford County			
8742 Lucent Blvd Ste 300 Highlands Ranch, CO 80129	As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 07/07 Last Active 7/05/16	Last 4 digits of account number 335	7		

Add the dollar value of your entries in C If this is the last page of your form, add	olumn A on this page. Write that number here:	\$264,304.		
Write that number here:	the donar value totals from all pages.	\$264,304.	00	
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed			
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that y we to someone else, list the creditor in Part 1, and you listed in Part 1, list the additional creditors h is page.	d then list the collection agen	cy here. Similarly, if yo	ou have more
Name, Number, Street, City, State & Rosenberg & Associates	Zip Code On v	which line in Part 1 did you enter	the creditor?2.1_	
7910 Woodmont Avenue #7 Bethesda, MD 20814	50 Last	4 digits of account number		

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	Outo	10 22 101 500 1	1 1100 007 1	0/10 1 ago 20 01	
Fill in this in	formation to identify your	case:			
Debtor 1	Catherine S Smitl	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	DISTRICT OF MARYLAN	ID		
Case numbe (if known)	r				Check if this is an amended filing
	orm 106E/F e E/F: Creditors W	/ho Have Unsecu	red Claims		12/15
any executory Schedule G: E: Schedule D: Ci left. Attach the name and case	contracts or unexpired leases kecutory Contracts and Unexp reditors Who Have Claims Sec	that could result in a claim. ired Leases (Official Form 10 ured by Property. If more spate. If you have no information	Also list executory of 6G). Do not include ce is needed, copy	ontracts on Schedule A/B: Pro any creditors with partially se he Part you need, fill it out, nu	RIORITY claims. List the other party to operty (Official Form 106A/B) and on cured claims that are listed in umber the entries in the boxes on the o of any additional pages, write your
1. Do any cr	editors have priority unsecure	d claims against you?			
■ No. Go	to Part 2.				
☐ Yes.					
Part 2: Li	st All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cr	editors have nonpriority unsec	cured claims against you?			
☐ No. Yo	u have nothing to report in this p	art. Submit this form to the cou	t with your other sche	edules.	
Yes.					
4. List all of unsecured		y for each claim. For each claim	listed, identify what t	ype of claim it is. Do not list clair	has more than one nonpriority ms already included in Part 1. If more ims fill out the Continuation Page of
					Total claim
4.1 Cap	ital One Bank Usa N	Last 4 digits	of account number	2714	\$376.00
Po E	riority Creditor's Name Box 30281 Lake City, UT 84130	When was the	e debt incurred?	Opened 01/19 Last Ac 5/24/19	ctive
	per Street City State Zip Code	As of the date	you file, the claim i	s: Check all that apply	
Who	incurred the debt? Check one.				
■ De	ebtor 1 only	☐ Contingent			
□ De	ebtor 2 only	☐ Unliquidate	ed		
□ De	ebtor 1 and Debtor 2 only	☐ Disputed			
☐ At	least one of the debtors and and	other Type of NONI	PRIORITY unsecured	I claim:	
□ сі	neck if this claim is for a com	munity	ans		
debt Is the	claim subject to offset?	Obligations report as prior		ration agreement or divorce that	you did not
■ No)	Debts to pe	ension or profit-sharin	g plans, and other similar debts	
□ Ye	es	Other. Spe	cify Credit Card		

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Debtor	1 Catherine S Smith	Case number (if known)				
4.2	Comenitybank/victoria Nonpriority Creditor's Name	Last 4 digits of account number	5120	\$212.00		
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 03/19 Last Active 5/24/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
4.3	Comenitycb/boscov	Last 4 digits of account number	2648	\$1,208.00		
	Nonpriority Creditor's Name		Opened 12/18 Last Active			
	Po Box 182120 Columbus, OH 43218	When was the debt incurred?	5/24/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
4.4	Comptroller of Maryland Nonpriority Creditor's Name	Last 4 digits of account number	\$900.00			
	301 West Preston Street, Room 409 Baltimore, MD 21201	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□Yes	Other. Specify tax				

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Debtor 1 Catherine S Smith				
4.5	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	0132	\$1,213.00
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 12/16 Last Active 5/01/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Dobson Express Care Nonpriority Creditor's Name	Last 4 digits of account number		\$104.00
	911 E Atkins St #D Dobson, NC 27017	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical		
4.7	Internal Revenue Service	Last 4 digits of account number		\$4,500.00
	Nonpriority Creditor's Name PO Box 7346 Philadelphia, PA 19101	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify tax		

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Debtor 1 Catherine S Smith							
4.8	Kohls/capone Nonpriority Creditor's Name	Last 4 digits of account number	2117	\$1,065.00			
	Po Box 3115 Milwaukee, WI 53201	When was the debt incurred?	Opened 5/03/14 Last Active 8/06/15				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing	ag plane, and other similar debts				
	☐ Yes	Other. Specify Charge Acc					
4.9	Ollo/tbom	Last 4 digits of account number	7464	\$1,234.00			
	Nonpriority Creditor's Name Po Box 9222 Old Bethpage, NY 11804	When was the debt incurred?	Opened 10/18 Last Active 5/24/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	og plans, and other similar debts				
	☐ Yes	Other. Specify Credit Card					
4.1 0	Syncb/tjx Cos	Last 4 digits of account number	1583	\$742.00			
	Nonpriority Creditor's Name Po Box 965015 Orlando, FL 32896	When was the debt incurred?	Opened 08/18 Last Active 5/26/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	og plans, and other similar debts				
	■ No						
	Yes	■ Other. Specify Charge Acc	COUNT				

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Debto	Catherine S Smith		Case number (if known)					
4.1	University of Maryland	Last 4 digits of account number		\$30.00				
	Nonpriority Creditor's Name Upper Chesapeake Medical Center PO Box 418701 Boston, MA 02241	When was the debt incurred?						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify medical						
4.1	Webbank/fingerhut Nonpriority Creditor's Name	Last 4 digits of account number	8875	\$2,485.00				
	6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 12/16 Last Active 6/26/19					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured						
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	No	☐ Debts to pension or profit-sharin	• •					
	Yes	Other. Specify Charge Acc	count					
4.1	Wells Fargo Dealer Svc Nonpriority Creditor's Name	Last 4 digits of account number	7988	\$6,666.00				
	Po Box 10709 Raleigh, NC 27605	When was the debt incurred?	Opened 9/01/14 Last Active 5/02/19					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only							
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin						
		Other. Specify Automobile						
	Yes							

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1	Catherine S Smith		Case number (if known)								
	have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.										
Name and	Address	On which entry in Part 1 or Part 2	did you list the original creditor?								
Pro Co		Line 4.11 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority	Unsecured Claims							
PO Box	2462		Part 2: Creditors with Nonprid	prity Unsecured Claims							
Aston, F	PA 19014		— Fait 2. Creditors with Noriphi	only onsecured claims							

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				-	Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	20,735.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	20,735.00

Last 4 digits of account number

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Fill in this infor	mation to identify your				
Debtor 1	Catherine S Smit				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND			
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Name, Number	r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	-				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	<u>, , </u>				
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

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	Out	30 10 22 10 1 200	1 11100 00/10/	10 1 ago 21 of	
Fill in this	information to identify yo	our case:			
Debtor 1	Catherine S Sr	mith			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	e: DISTRICT OF MARYLA	ND		
Case num	her				
(if known)					Check if this is an amended filing
Officia	l Form 106H				
		dobtoro			4045
Sched	dule H: Your Co	deptors			12/15
,	,	wn). Answer every question (If you are filing a joint case,		as a codebtor.	
■ No □ Yes					
		you lived in a community pr ana, Nevada, New Mexico, Pu			states and territories include
_		,	, , , , , , , , , , , , , , , , , , , ,	,	
	. Go to line 3.				
⊔ Yes	s. Did your spouse, former s	spouse, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor on	lly if that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State at	nd ZIP Code		Column 2: The cred Check all schedules	litor to whom you owe the debt sthat apply:
					,
3.1	Name			Schedule D, line	
				☐ Schedule E/F, lir☐ Schedule G, line	
-	Number Street				
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lir	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your c	ase:								
De	ebtor 1 Catherine S	Smith			_					
1 -	ebtor 2 ouse, if filing)				_					
Un	ited States Bankruptcy Court for the	: DISTRICT OF MARY	LAND							
	se number		_			Check	if this is:			
(If k	(nown)						amende			
									ing postpetition following date:	
0	fficial Form 106l					MI	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
Pa	puse. If you are separated and you ach a separate sheet to this form. It 1: Describe Employment									
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-	filing spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed				☐ Empl	oyed		
	information about additional employers.	,,	■ Not employed				■ Not e	mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the d	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Ir	nclude your nor	n-filing
	ou or your non-filing spouse have more space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for t	hat perso	on on the	lines below. If	you need
						For Deb	tor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Catherine S Smith	_	Ca	se number (if kno	wn)				
				F	or Debtor 1			Debtor :		
	Cop	y line 4 here	4.	\$	0.	00	\$	9 0	0.00	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	0	00	\$		0.00	1
	5b.	Mandatory contributions for retirement plans	5b.			00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.			00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.	. \$		00	\$		0.00	_
	5e.	Insurance	5e.	. \$		00	\$		0.00	_
	5f.	Domestic support obligations	5f.	\$	0.	00	\$		0.00	1
	5g.	Union dues	5g.	. \$		00	\$		0.00	
	5h.	Other deductions. Specify:	5h.	+ \$	0.	00	+ \$		0.00	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.	00	\$		0.00	<u>) </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.	00	\$		0.00	<u>)</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	01	monthly net income.	8a.			00	\$		0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b.	. \$	0.	00	\$		0.00	<u>) </u>
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0	00	\$		0.00	1
	8d.	Unemployment compensation	8d.			00	\$-		0.00	_
	8e.	Social Security	8e.				\$	1.9	900.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 	\$		00	\$ \$	3.0	0.00 040.61	_
	8h.	Other monthly income. Specify:	8h.			00	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	750.	00	\$	4	,940.6	1
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	750.00	_ C	40	40.61	_ \$	5.690.61
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ <u> </u>	7 30.00	[] ^Ψ -	4,3	40.01	- U -	3,090.01
11.	Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe					chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	5,690.61
12	Do:	you expect an increase or decrease within the year often you file this form	2					L	Combi month	ned ly income
13.	■	you expect an increase or decrease within the year after you file this form No. Yes Explain:	•							

Official Form 106l Schedule I: Your Income page 2

ΞIII	in this informa	tion to identify yo	uir casa:			1		
						Olympia	al Makin in	
Deb	tor 1	Catherine S	Smith			□ □	eck if this is: An amended filing	
Deb	tor 2						A supplement show	ving postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the:	DISTRI	CT OF MARYLAND			MM / DD / YYYY	
	e number nown)							
_								
O	fficial Fo	rm 106J						
S	chedule	J: Your I	Expen	ses				12/15
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par	t 1: Descr	ibe Your House	hold					
1.	Is this a join	nt case?						
	■ No. Go to □ Yes. Doe	line 2. s Debtor 2 live i	n a separa	ate household?				
	□ N	0						
	□ Ye	es. Debtor 2 mus	t file Officia	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.					_	Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses of	penses include f people other the d your depender	han $_{\square}$	No Yes				
Est	t 2: Estim	ate Your Ongoin	ng Monthi our bankru	y Expenses iptcy filing date unless y y is filed. If this is a supp				
the		n assistance and		government assistance i luded it on <i>Schedule I:</i>)			Your exp	enses
-		,						
4.		or home owners and any rent for the		ses for your residence. In lot.	nclude first mortgage	e 4.	\$	1,827.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	\$	0.00
				pkeep expenses		4c.	i ————————————————————————————————————	50.00
5.		owner's associati nortgage pavme		dominium dues F ur residence , such as ho	me equity loans	4d. 5.	\$ \$	0.00 0.00
					594, 104110	٠.	*	U.UU

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Debtor 1	Catherine S Smith	Case num	ber (if known)	
6. Utili	iae:			
o. O tili 6a.	Electricity, heat, natural gas	6a.	\$	265.00
6b.	Water, sewer, garbage collection	6b.	·	89.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	
6d.	Other. Specify:	6d.	·	420.00
	d and housekeeping supplies	ou.	·	0.00
	. •		·	600.00
	dcare and children's education costs	8.	·	0.00
	hing, laundry, and dry cleaning	9.		200.00
	onal care products and services	10.	·	100.00
	ical and dental expenses	11.	\$	400.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	300.00
	ot include car payments.	13.	·	
	rtainment, clubs, recreation, newspapers, magazines, and books		·	100.00
	ritable contributions and religious donations	14.	»	15.00
5. Ins u	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15b.	·	500.00
	Other insurance. Specify:	15d.	·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
Spe		16.	\$	0.00
	allment or lease payments:	47-	Φ.	270.00
	Car payments for Vehicle 1	17a.	·	370.00
	Car payments for Vehicle 2	17b.	·	427.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	acted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Fr payments you make to support others who do not live with you.	10.	\$	
		19.	Ψ	0.00
Spe	er real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i> e		our Incomo	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20b. 20c.	·	0.00
		20d.	·	
	Maintenance, repair, and upkeep expenses		·	0.00
	Homeowner's association or condominium dues	20e.	· -	0.00
	r: Specify:	21.	+\$	0.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	5,663.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	5,663.00
3. Calc	ulate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,690.61
	Copy your monthly expenses from line 22c above.	23b.	*	5,663.00
			·	
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	27.61
For e	ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage? O.	u file this mortgage լ	s form? payment to increase	or decrease because of a
ΠY	es. Explain here:			

Fill in th	is informa	ation to identify your	case:				
Debtor 1		Catherine S Smith	1				
		First Name	Middle Name	Las	st Name		
Debtor 2 (Spouse if, t		First Name	Middle Name	Las	st Name	_	
United S	tates Bank	ruptcy Court for the:	DISTRICT OF MARYLAND				
Case nui (if known)	mber						☐ Check if this is an amended filing
		106Dec	n Individual D	aht	or's Schadule	16	4045
<u> </u>	arati	on About a	III III aiviaaai B		or 3 Concadic		12/15
You mustobtaining	t file this f money o	form whenever you file or property by fraud in J.S.C. §§ 152, 1341, 1	connection with a bankrupt	ımend	ed schedules. Making a fal	se state	ement, concealing property, or 00, or imprisonment for up to 20
Did	you pay o	or agree to pay some	one who is NOT an attorney	to help	you fill out bankruptcy fo	rms?	
	No						
	Yes. Na	me of person					kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
		of perjury, I declare rue and correct.	that I have read the summary	/ and s	schedules filed with this de	eclaratio	on and
X	/s/ Cathe	rine S Smith		Х			
=	Catherin	e S Smith of Debtor 1			Signature of Debtor 2		
	Date Se	ptember 18, 2019			Date		

Fill	in thi	is inform	ation to identify you	r case:								
Deb	otor 1		Catherine S Smi	th								
			First Name	Middle	Name	La	st Name		_			
	otor 2 use if, f	iling)	First Name	Middle	Name	La	st Name		_			
Uni	ted St	tates Ban	kruptcy Court for the:	DISTRICT	OF MARYLAN	ID			_			
	se nur	mber			_				_	Check if this is an amended filing		
Sta	ater	ment	m 107 of Financial						<u> </u>	4/1:		
info	rmati	on. If mo	ore space is needed,). Answer every que	attach a sepa								
Par	t 1:	Give De	etails About Your Ma	ırital Status a	nd Where You	Lived B	efore					
1.	Wha	t is your	current marital statu	ıs?								
	_	Married Not marri	ied									
2.	Durii	During the last 3 years, have you lived anywhere other than where you live now?										
		No Yes. List	all of the places you I	ived in the last	t 3 years. Do no	ot include	where you live I	now.				
	Deb	otor 1 Prio	or Address:		ates Debtor 1		Debtor 2 Prior	Address:		Dates Debtor 2 lived there		
3. state			st 8 years, did you ev s include Arizona, Ca							y? (Community property Visconsin.)		
	_	No Yes. Mak	se sure you fill out <i>Scl</i>	nedule H: You	r Codebtors (Off	ficial For	n 106H).					
Par	t 2	Explain	the Sources of You	r Income								
4.	Fill in	the total	any income from en amount of income yo g a joint case and you	u received from	m all jobs and a	all busine:	ses, including p	part-time activi	ities.	ndar years?		
		No Yes. Fill i	n the details.									
				Debtor 1				Debtor	2			
				Sources of i			income e deductions and ions)		s of income all that apply.	Gross income (before deductions and exclusions)		

Official Form 107

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Case number (if known)

5.	Include in and other	come regard public bene	dless of wheth fit payments;	ner that incor pensions; re	me is taxable. Exental income; inte	amples o rest; divid	dends; money colle	alimony; child supp	; royalties; an	ecurity, unemployment d gambling and lottery	
	List each	source and t	the gross inco	ome from ea	ch source separa	ately. Do i	not include income	that you listed in li	ne 4.		
	□ No										
	_	Fill in the de	etails.								
				Dalitand				Daldano			
				Debtor 1 Sources of Describe b		each (befor	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
		y 1 of curre filed for bar	nt year until nkruptcy:	Social Se Benefits	ecurity		\$6,750.00				
	r last cale anuary 1 to	ndar year: December	31, 2018)	Social Se Benefits	ecurity		\$9,000.00	1			
Pa	rt 3: Lis	t Certain Pa	nyments You	Made Befo	re You Filed for	Bankrup	otcy				
o.	□ No.	Neither Deindividual principal princ	ebtor 1 nor D primarily for a 90 days befor Go to line 7 List below e paid that cre not include to adjustment or Debtor 2 o 90 days befor Go to line 7 List below e include pay attorney for	Debtor 2 has a personal, far personal, far you filed it. Deach creditor payments to ton 4/01/22 or both have bre you filed it.	amily, or househousehousehousehousehousehousehouse	umer del old purpos lid you pa nid a total nts for do this bankr rs after th umer del lid you pa nid a total obligations	ots. Consumer delete." y any creditor a too of \$6,825* or more mestic support oblivation of support oblivation cases filed of ots. y any creditor a too of \$600 or more as s, such as child su	e in one or more pa ligations, such as c on or after the date of tal of \$600 or more and the total amount poort and alimony.	yments and the hild support a port adjustment. you paid that Also, do not i	creditor. Do not nclude payments to ar	
	Creditor	's Name and	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for	
7.	Insiders in of which ya business alimony.	nclude your r you are an of ss you operat	relatives; any fficer, director	general part , person in c roprietor. 11	tners; relatives of control, or owner	f any gene of 20% or	eral partners; partr more of their votir		ou are a gene ny managing	ral partner; corporation agent, including one for	
	Insider's	Name and	Address		Dates of payme	ent	Total amount	Amount you	Reason fo	r this payment	
							paid	still owe			

Debtor 1 Catherine S Smith

Del	otor 1 Catherine S Smith		Cas	se number (if known)		
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No		rments or transfer a	any property on a	eccount of a debt	that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi Include creditor	
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of the o	2250
	Case number	Nature of the case	Court or agency		Status of the C	Jase
	Unknown Plaintiff vs Unknown Defendant 1618027RAG	BankruptcyChapt er13	US BKPT CT M BALTIMOR	ID	☐ Pending ☐ On appeal ☐ Concluded	
					Dismissed -	0.00
	Unknown Plaintiff vs Unknown Defendant 1618027RAG	BankruptcyChapt er13	US BKPT CT M BALTIMOR	ID	☐ Pending ☐ On appeal ☐ Concluded	
					Dismissed -	0.00
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garni		seized, or levied? Value of the property
		Explain what happened	d			ргоролгу
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fir	nancial institution	n, set off any amo	ounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the benefit	of creditors, a

Dei	Catnerine S Smith		Case number	(If Known)	
Pai	rt 5: List Certain Gifts and Contribution	าร			
13.	■ No	uptcy,	did you give any gifts with a total value of more t	han \$600 per person'	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$60	00	Describe the gifts	Dates you gave	Value
	per person Person to Whom You Gave the Gift and			the gifts	
	Address:				
14.	Within 2 years before you filed for bankr ■ No	uptcy,	did you give any gifts or contributions with a total	ıl value of more than	\$600 to any charity
	☐ Yes. Fill in the details for each gift or c	contribu	ution.		
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
13.	or gambling? No Yes. Fill in the details.	ipicy o	or since you filed for bankruptcy, did you lose any	ining because of their	t, ille, other disaste
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property los
Pai	rt 7: List Certain Payments or Transfers	s			
16.	consulted about seeking bankruptcy or	prepar	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	⁄ ou	Description and value of any property transferred	Date payment or transfer was made	Amount o paymen
	Christman & Fascetta LLC 810 Gleneagles Court Suite 301 Towson, MD 21286 christman-fascetta@bankruptcymd		Attorney Fees	July 2019	\$950.00
17.	promised to help you deal with your cred	ditors		or transfer any prope	rty to anyone who
	Do not include any payment or transfer that	t you lis	sted on line 16.		
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount o
	Address		transferred	or transfer was made	paymen
40	With the American Instruments of the different continu		did and the decimal to a second and the secon		41

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

Official Form 107

Debtor 1	Catherine	S	Smith
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Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes, Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Pert 9: Identify Property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes, Fill in the details.		include gifts and transfers that you have alrea ■ No □ Yes. Fill in the details.	dy listed on this statemen	t.		
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Pos. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Port 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension truds, cooperatives, associations, and other financial institutions. Name of Financial institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Pos. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Pos. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Pos. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Pos. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Pos. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Pos. Fill in the details. No pound of control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Pos. Fill in the details. No pound of control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Pos. Fill in the details. No pound of control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust		Address			payments received or debts	
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Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Value		_				
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☐ Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP	23.		omeone else owns? Incl	ude any property	you borrowed from, are storing	for, or hold in trust
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			(Number, Street, City,		escribe the property	Value

Debtor 1 Catherine S Smith

Part 10: Give Details About Environmental Information

For	the purpose of Part 10, the following definitio	ns apply:		
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surface water, ground	0. ,	
	Site means any location, facility, or property to own, operate, or utilize it, including dispose		aw, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an envir	onmental law defines as a hazardous	waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that	t you know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	any release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admi	inistrative proceeding under any envir	onmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or C	Connections to Any Business		
	Within 4 years before you filed for bankrupto		v of the following connections to any	business?
	☐ A sole proprietor or self-employed in	• •		
	☐ A member of a limited liability compa		-	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	art 12.		
	Yes. Check all that apply above and fill i			
	Business Name	Describe the nature of the business	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security r	iumber of ITIN.

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Debtor 1	Catherine	S Smith
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28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	cy, did you give a financial statement to a	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	

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Debtor 1 Catherine S Smith Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Catherine S Smith Signature of Debtor 2 Catherine S Smith Signature of Debtor 1 Date September 18, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Maryland

Case N	
C(s) Chapter	r 7
EDITOR MATRIX	X
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_	Smith nith

Signature of Debtor

Capital One Bank Usa N Po Box 30281 Salt Lake City, UT 84130

Comenitybank/victoria Po Box 182789 Columbus, OH 43218

Comenitycb/boscov Po Box 182120 Columbus, OH 43218

Comptroller of Maryland 301 West Preston Street, Room 409 Baltimore, MD 21201

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Dobson Express Care 911 E Atkins St #D Dobson, NC 27017

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Kohls/capone Po Box 3115 Milwaukee, WI 53201

Ollo/tbom Po Box 9222 Old Bethpage, NY 11804 Pro Co PO Box 2462 Aston, PA 19014

Rosenberg & Associates 7910 Woodmont Avenue #750 Bethesda, MD 20814

Specialized Loan Servi 8742 Lucent Blvd Ste 300 Highlands Ranch, CO 80129

Syncb/tjx Cos Po Box 965015 Orlando, FL 32896

University of Maryland Upper Chesapeake Medical Center PO Box 418701 Boston, MA 02241

Webbank/fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303

Wells Fargo Dealer Svc Po Box 10709 Raleigh, NC 27605